

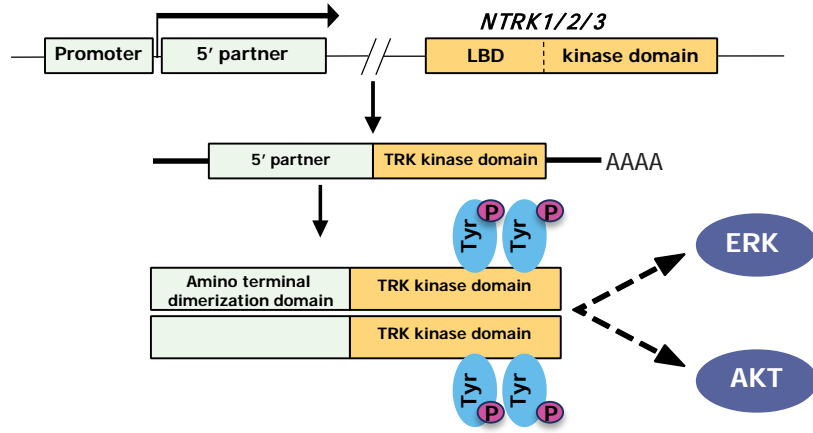
# Efficacy of larotrectinib in adolescents and young adults with TRK fusion cancer

Soledad Gallego,<sup>1</sup> Valentina Boni,<sup>2</sup> Ulrik Lassen,<sup>3</sup> Anna Farago,<sup>4</sup> Wafik El-Deiry,<sup>5</sup> David Hong,<sup>6</sup> Blanca López-Ibor,<sup>2</sup> Scott Cruickshank,<sup>7</sup> Michael C. Cox,<sup>7</sup> Nora Ku,<sup>7</sup> Deborah Morosini,<sup>8</sup> Alexander Drilon,<sup>9</sup> Shivaani Kummar<sup>10</sup>

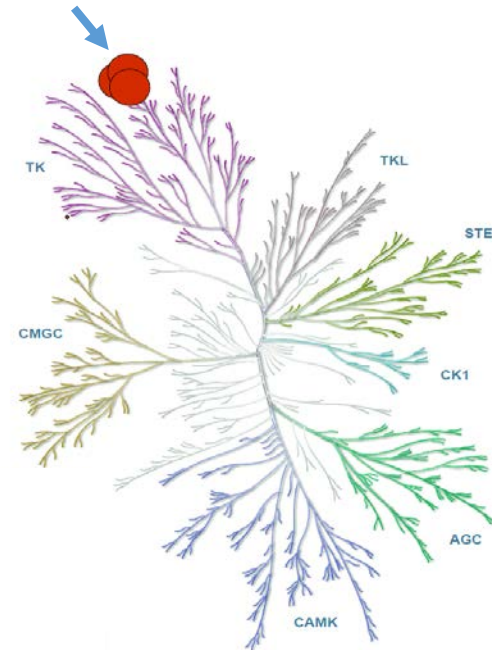
*<sup>1</sup>Hospital Universitario Vall d'Hebron, Barcelona, Spain; <sup>2</sup>Centro Integral Oncologico Clara Campal, Madrid, Spain; <sup>3</sup>Rigshospitalet, Copenhagen, Denmark; <sup>4</sup>Massachusetts General Hospital, Boston, MA, USA; <sup>5</sup>Fox Chase Cancer Center, Philadelphia, PA, USA; <sup>6</sup>MD Anderson Cancer Center, Houston, TX, USA; <sup>7</sup>Loxo Oncology, South San Francisco, CA, USA; <sup>8</sup>Loxo Oncology, Stamford, CT, USA; <sup>9</sup>Memorial Sloan Kettering Cancer Center, New York, NY, USA <sup>10</sup>Stanford Cancer Center, Stanford University, Palo Alto, CA, USA*

# Larotrectinib is a selective, CNS-active TRK inhibitor

*NTRK* gene fusions are rare but recurrent oncogenic drivers

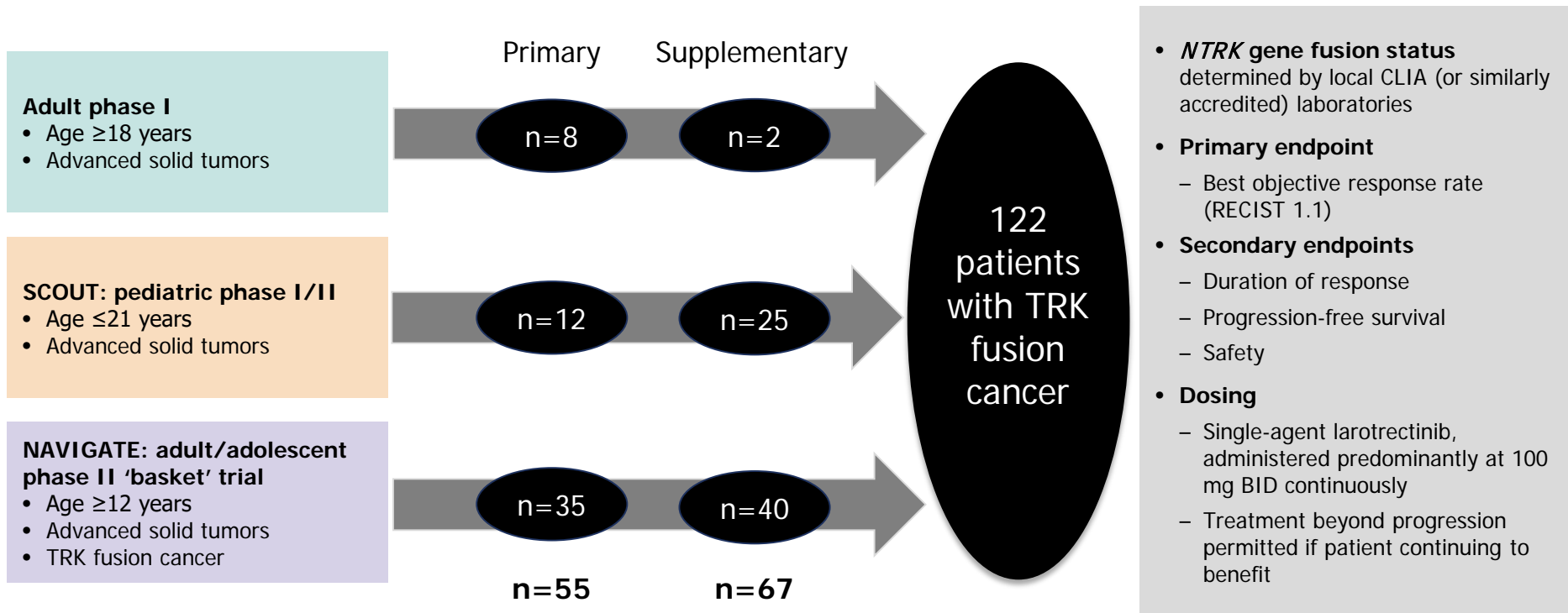


TRKA/B/C



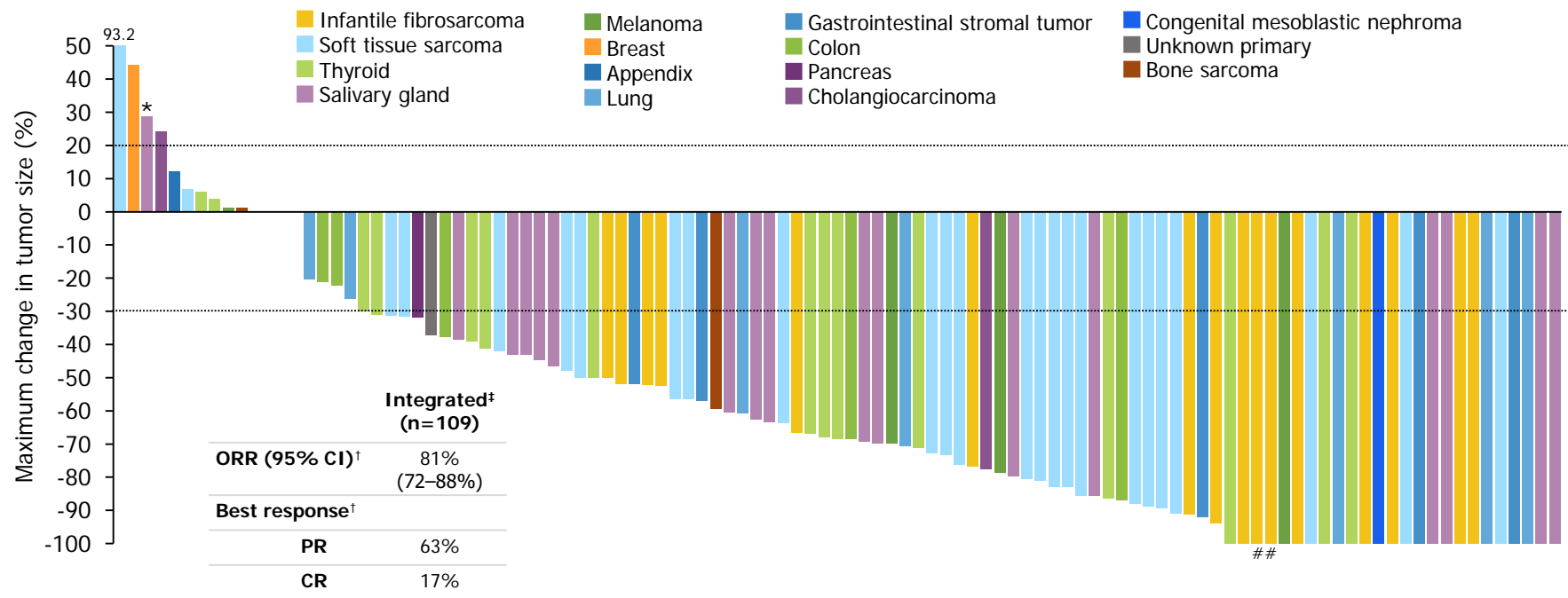
- Larotrectinib is a highly potent small-molecule inhibitor of TRKA, TRKB, and TRKC (5–11 nM IC<sub>50</sub> in cellular assays)
- Demonstrated activity in CNS disease<sup>1</sup>
- Liquid formulation allows dosing of children as young as at birth and delivers equivalent pharmacokinetics to capsules

# Patients with TRK fusion cancer: Integrated dataset



Data cutoff: 30 July 2018

# Integrated dataset: Larotrectinib is efficacious regardless of tumor type



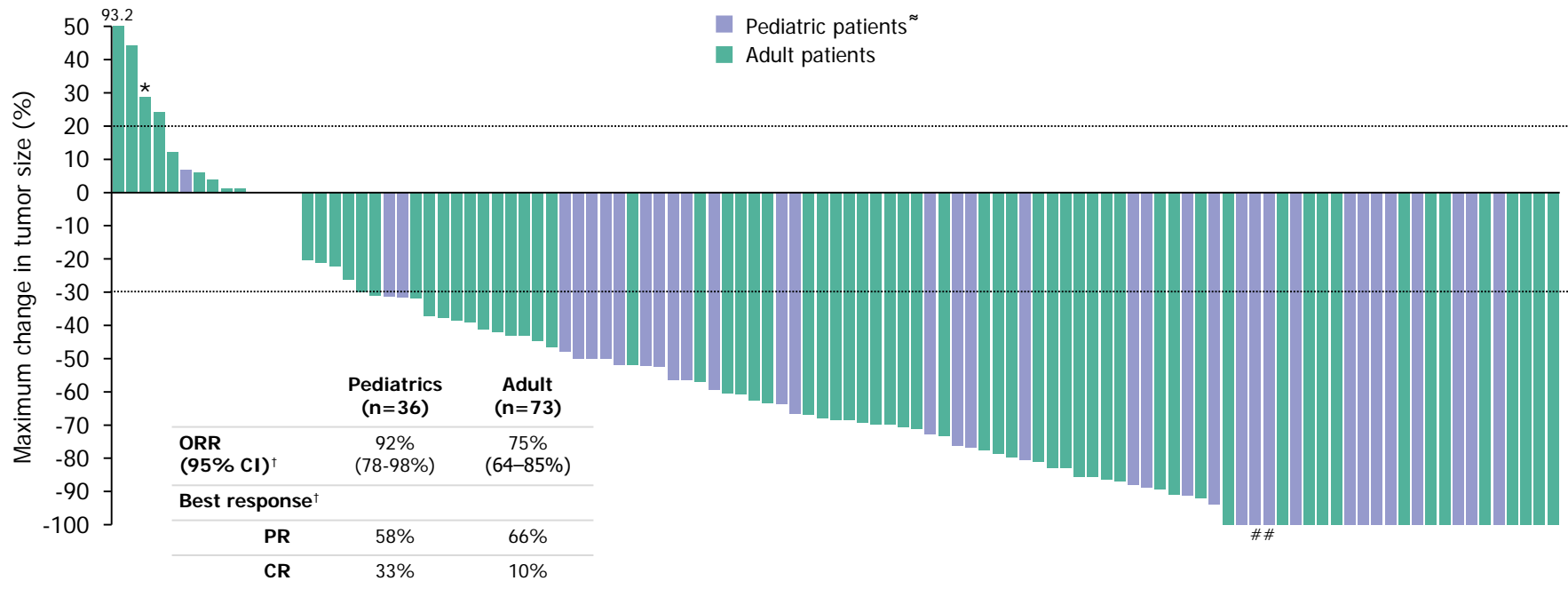
<sup>†</sup>Includes 9 unconfirmed PRs pending confirmation; does not include 13 patients continuing on study and awaiting initial response assessment \*Patient had TRKC solvent front resistance mutation (G623R) at baseline due to prior therapy; #Surgical CR; <sup>†</sup>RECIST 1.1. Note: Two patients not shown here. These patients discontinued treatment prior to any post-baseline tumor measurements.

CR, complete response; ORR, objective response rate; PR, partial response

Lassen et al. presented at ESMO 2018

Investigator response assessments, as of 30 July 2018

# Integrated dataset: Larotrectinib is efficacious regardless of age



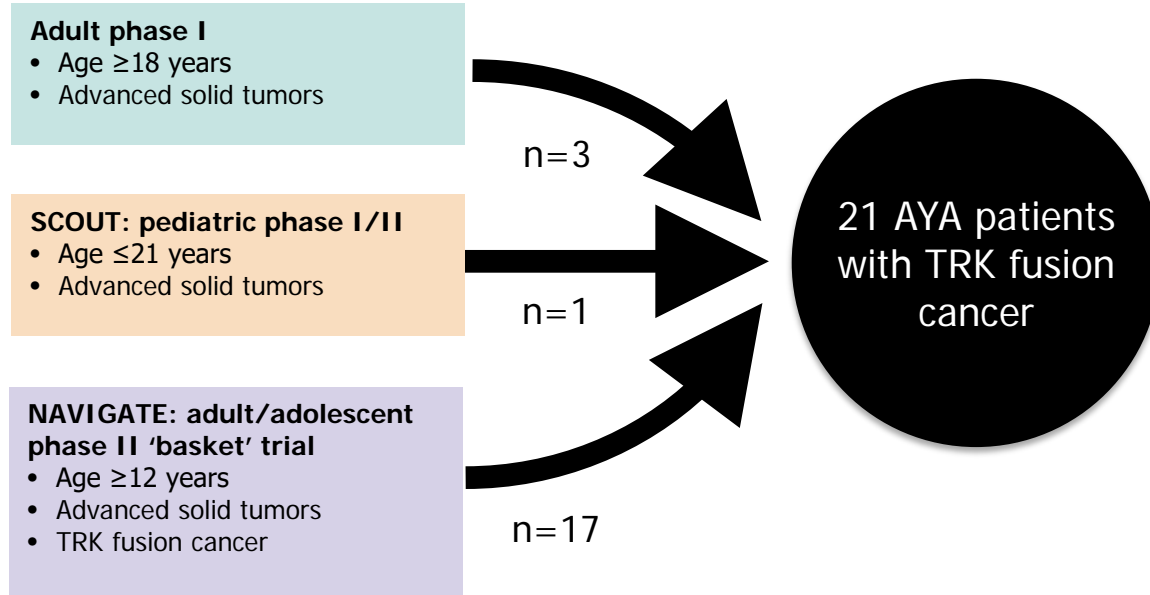
Includes 9 unconfirmed PRs pending confirmation; does not include 13 patients continuing on study and awaiting initial response assessment. <sup>‡</sup>Age <21 years <sup>\*</sup>Patient had TRKC solvent front resistance mutation (G623R) at baseline due to prior therapy; <sup>#</sup>Surgical CR; <sup>†</sup>RECIST 1.1. Note: Two patients not shown here. These patients discontinued treatment prior to any post-baseline tumor measurements.

CR, complete response; ORR, objective response rate; PR, partial response

Lassen et al. presented at ESMO 2018

Investigator response assessments, as of 30 July 2018

# AYA patients with TRK fusion cancer



- ***NTRK* gene fusion status**  
determined by local CLIA (or similarly accredited) laboratories
- **Primary endpoint**
  - Best objective response rate (RECIST 1.1)
- **Secondary endpoints**
  - Duration of response
  - Progression-free survival
  - Safety
- **Dosing**
  - Single-agent larotrectinib, administered predominantly at 100 mg BID continuously
  - Treatment beyond progression permitted if patient continuing to benefit

Data cutoff: 30 July 2018

# Baseline characteristics

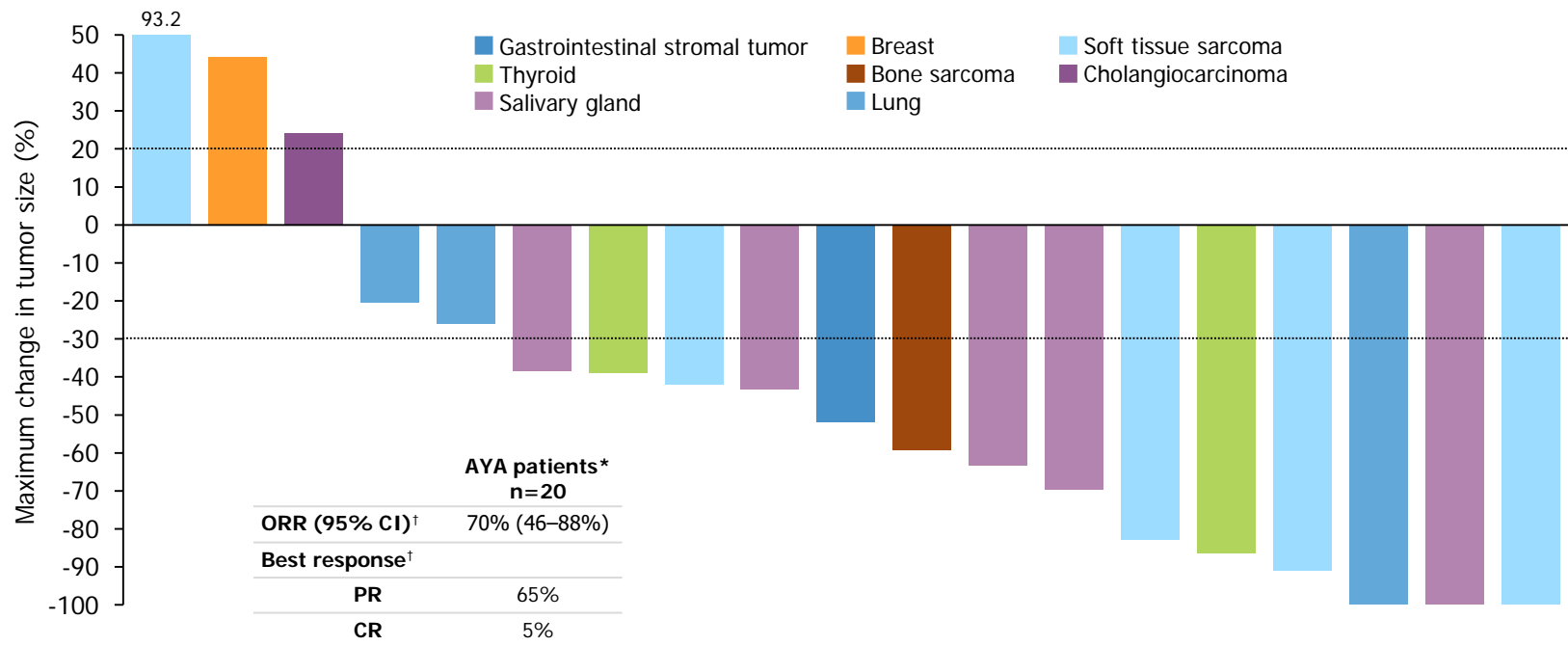
Characteristic	n=21
<b>Gender, n (%)</b>	
Male	11 (52)
Female	10 (48)
<b>Median age (range), years</b>	31 (20–39)
<b>Age group, n (%)</b>	
15–<21 years	1 (5)
21–30 years	8 (38)
31–39 years	12 (57)
<b>Tumor type, n (%)</b>	
Salivary gland	5 (24)
Soft tissue sarcoma	5 (24)
Lung	3 (14)
Thyroid	3 (14)
Breast	1 (5)
Bone sarcoma	1 (5)
Cholangiocarcinoma	1 (5)
Gastrointestinal stromal tumor	1 (5)
Melanoma	1 (5)

# Baseline characteristics

Characteristic	n=21
<b><i>NTRK</i> gene fusion, n (%)</b>	
<i>NTRK1</i>	9 (43)
<i>NTRK2</i>	0
<i>NTRK3</i>	12 (57)
<b>ECOG PS, n (%)</b>	
0	8 (38)
1	10 (48)
2	3 (14)
<b>Disease status at study enrollment, n (%)</b>	
Metastatic	19 (90)
Locally advanced	2 (10)
<b>Prior cancer treatment, n (%)</b>	21 (100)
Surgery	19 (90)
Systemic therapy	16 (76)
Radiotherapy	14 (67)
<b>No. of prior systemic regimens, n (%)</b>	
0	5 (24)
1	7 (33)
2	3 (14)
≥3	6 (29)



# High response rate in AYA patients with TRK fusion cancer

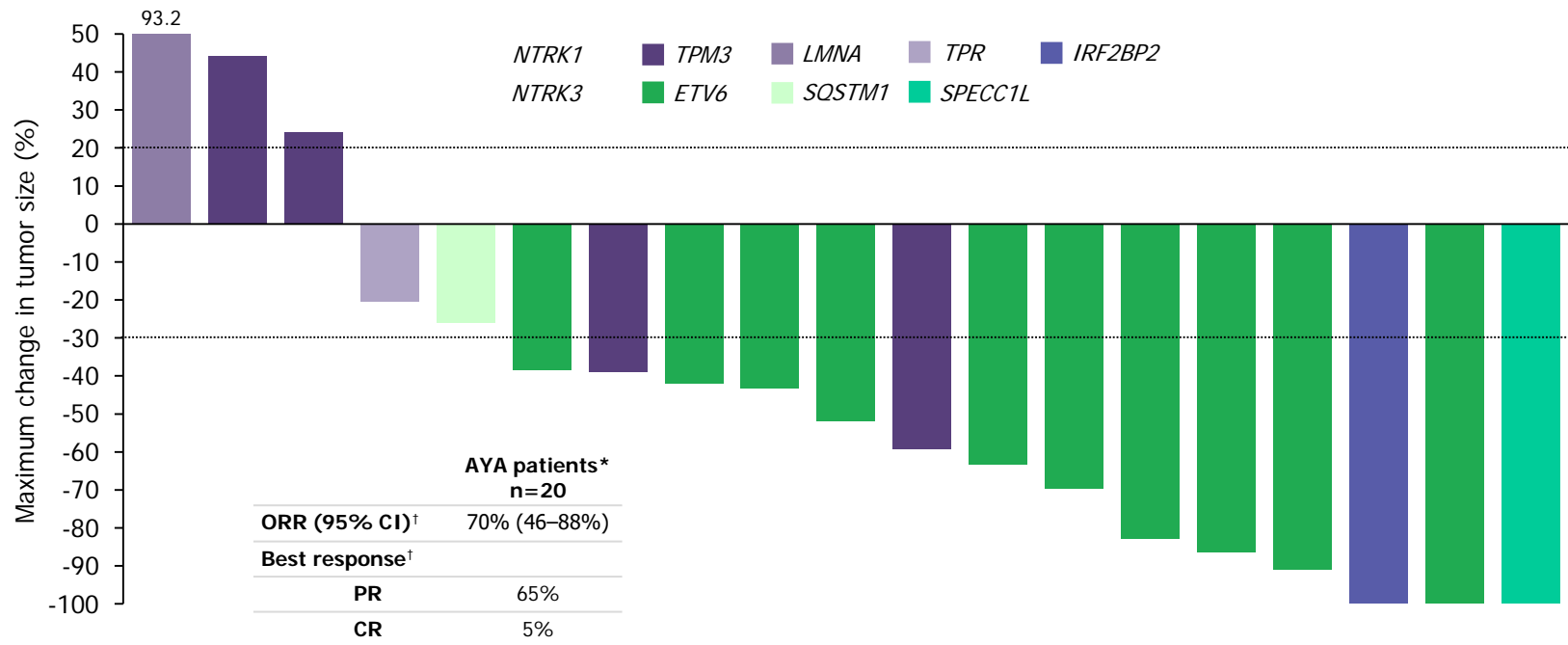


\*Evaluable patients; includes 1 unconfirmed PR pending confirmation; does not include 2 patients- 1 patient continuing on study and awaiting initial response assessment, and 1 patient discontinued treatment prior to any post-baseline tumor measurements; †RECIST 1.1.

CR, complete response; ORR, objective response rate; PR, partial response

Investigator response assessments, as of 30 July 2018

# High response rate in AYA patients with TRK fusion cancer

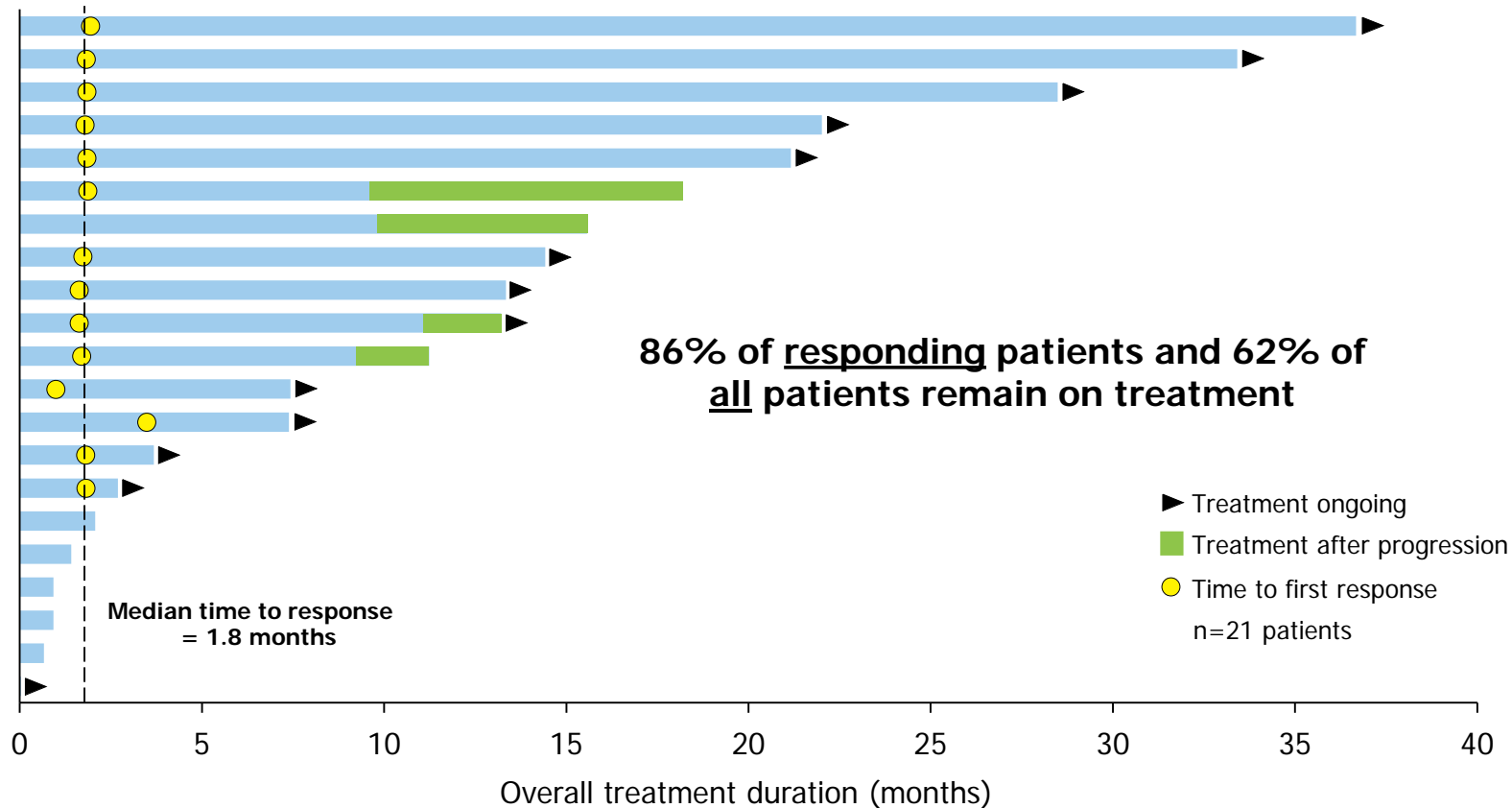


\*Evaluable patients; includes 1 unconfirmed PR pending confirmation; does not include 2 patients- 1 patient continuing on study and awaiting initial response assessment, and 1 patient discontinued treatment prior to any post-baseline tumor measurements; †RECIST 1.1.

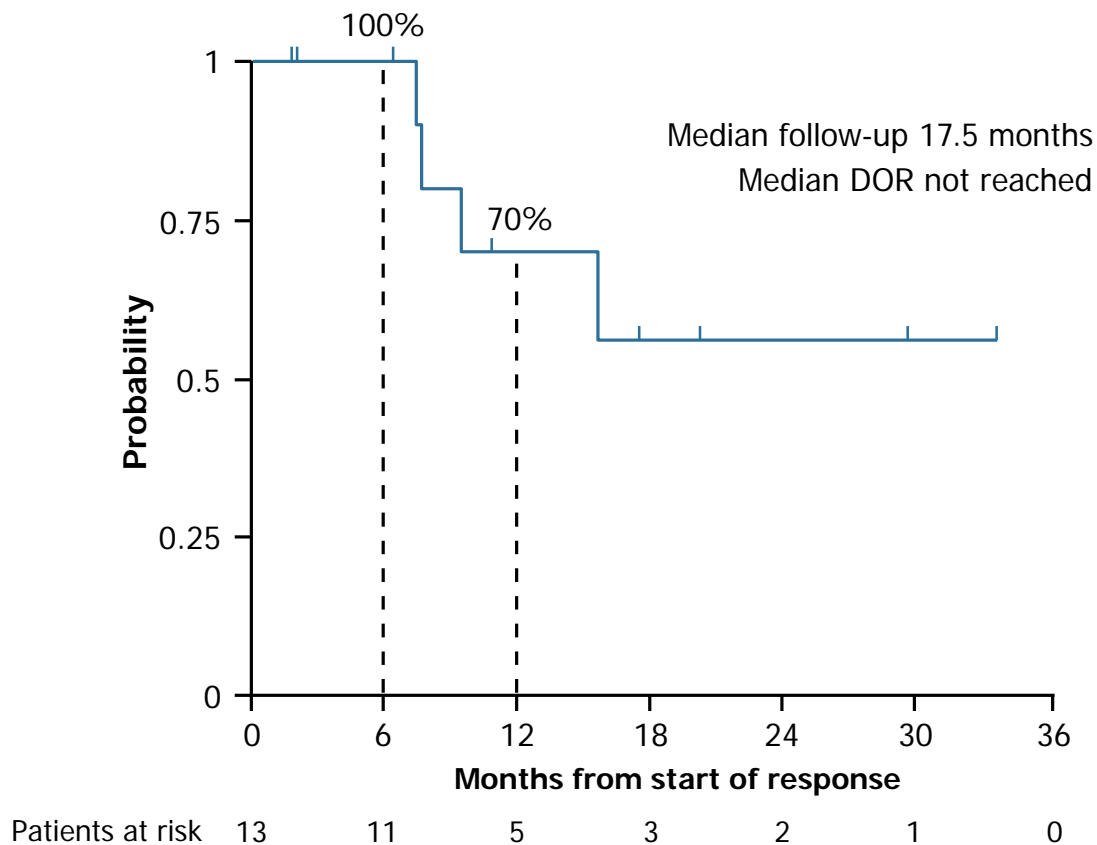
CR, complete response; ORR, objective response rate; PR, partial response

Investigator response assessments, as of 30 July 2018

# Duration of larotrectinib treatment



# Sustained responses with larotrectinib: Duration of response\*



\* In patients with confirmed complete or partial responses  
DOR, duration of response

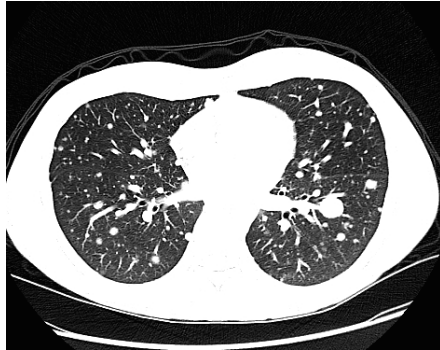
Investigator response assessments, as of 30 July 2018

## Adverse events with larotrectinib: ≥15% in safety database (n=207)

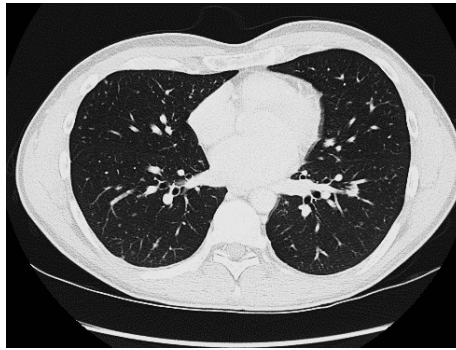
	Treatment-emergent AEs (%)					Treatment-related AEs (%)		
	Grade 1	Grade 2	Grade 3	Grade 4	Total	Grade 3	Grade 4	Total
Fatigue	18	15	3	–	36	<1	–	18
Dizziness	25	3	1	–	29	<1	–	21
Nausea	24	3	1	–	29	1	–	15
Constipation	22	5	<1	–	27	–	–	12
Anemia	10	7	10	–	27	2	–	11
ALT increased	17	5	3	<1	26	2	<1	21
AST increased	18	5	3	–	26	1	–	19
Cough	23	3	<1	–	26	–	–	1
Diarrhea	16	6	1	–	23	–	–	5
Vomiting	17	6	<1	–	23	–	–	10
Pyrexia	12	5	<1	<1	18	–	–	1
Dyspnea	10	6	2	–	18	–	–	1
Headache	13	4	–	–	16	–	–	4
Myalgia	12	3	1	–	16	<1	–	7
Peripheral edema	12	4	–	–	15	–	–	7

- 11 (9%) of 122 patients with TRK fusion cancer required dose reductions – all maintained tumor regression on reduced dose
- 1 (<1%) of 122 patients with TRK fusion cancer discontinued larotrectinib due to an adverse event

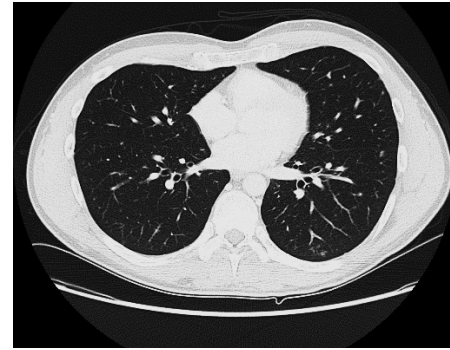
# *ETV6-NTRK3* fusion papillary thyroid cancer



Study baseline



Study cycle 3 day 1



Study cycle 7 day 1

- 33-year-old male with metastatic *ETV6-NTRK3* papillary thyroid cancer who had undergone multiple prior surgical resections, and received 2 prior lines of iodine therapy and trametinib/pazopanib
- Started on larotrectinib 100 mg BID
- Confirmed partial response by end of cycle 2 with 88% reduction in target lesion size per RECIST 1.1
- Continues on larotrectinib and in response, with duration of treatment 33.4+ months as of July 2018

# Conclusions

- Larotrectinib yields a high response rate in AYA patients with TRK fusion cancer, regardless of tumor and fusion type:
  - ORR of 70% (n=21) per investigator assessment
- At a median follow-up of 17.5 months in the AYA dataset:
  - Median DOR not reached
  - An estimated 70% of responses were ongoing at 12 months
- Prolonged therapy with larotrectinib appears to be associated with manageable toxicity
- FDA approved first ever TRK inhibitor (Nov 26 2018); MAA submitted to EMA in August 2018
- Genomic profiling with assays capable of identifying *NTRK* gene fusions should be strongly considered in AYA patients with solid tumors of all histologies when determining systemic treatment options

# Acknowledgments

- We thank the patients and their families, many of whom traveled long distances to participate in these studies
- These studies are funded by Loxo Oncology, Inc and Bayer AG



NAVIGATE